

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MA</i>	<i>UBH</i>	<i>4/29/00</i>
O.I.P.E. CLASSIFIER		<i>7</i>	<i>5-2-00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>665W</i>	<i>7/6-00</i>

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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